Notice Regarding Wellness Program

PEEHIP Choose Well, Live Well is a voluntary wellness program available to all PEEHIP subscribers and covered spouses who are enrolled in PEEHIP’s Hospital Medical (group #14000) plan while not Medicare-eligible and covered on a retiree contract. The program is administered according to federal rules permitting employer sponsored wellness programs that seek to improve employee health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, as applicable, among others. If you choose to participate in the wellness program you will be asked to complete a wellness screening, which will include a blood test for glucose, cholesterol, and triglycerides. You may also be asked to complete up to four telephonic health coaching calls with a nurse or health coach, or you may choose to complete other wellness activities such as online coaching or a health risk assessment questionnaire. You are not required to participate in the wellness screening or other wellness activities.

However, members who choose to participate in the wellness program by the annual deadline will receive an incentive in the form of a $50 monthly waiver of the wellness premium for the entire plan year. Although you are not required to participate in the wellness screening or other wellness activities, only those members who complete the wellness program activities requested of them will receive the wellness premium waiver. Additional incentives of up to a $50 per month premium waiver may be available for members who are non-tobacco users or who participate in a tobacco cessation program (see the PEEHIP Member Handbook for additional details).

If you are unable to participate in any of the health-related activities or other wellness program requirements, you may be entitled to a reasonable accommodation or an alternative standard. You may request a reasonable accommodation or an alternative standard by contacting PEEHIP at 877.517.0020.

The results from your wellness screening will be used to provide you with information to help you understand your current health and potential risks, and may also be used to offer you services through the wellness program, such as wellness coaching and/or disease management coaching. You also are encouraged to share your results or concerns with your own doctor.

Protections from Disclosure of Medical Information

We are required by law to maintain the privacy and security of your personally identifiable health information. Although the PEEHIP wellness program may use aggregate information it collects to design a program based on identified health risks in the workplace, PEEHIP will never disclose any of your personal information either publicly or to the employer, except as necessary to respond to a request from you for a reasonable accommodation needed to participate in the wellness program, or as expressly permitted by law. Medical information that personally identifies you that is provided in connection with the wellness program will not be provided to your supervisors or managers and may never be used to make decisions regarding your employment.
Your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the wellness program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the wellness program or receiving an incentive. Anyone who receives your information for purposes of providing you services as part of the wellness program will abide by the same confidentiality requirements. The only individual(s) who will receive your personally identifiable health information is (are) nurses, doctors, health coaches, and staff from PEEHIP and our business associates in order to provide you with services under the wellness program.

PEEHIP and its business associates are required by federal law to comply with certain privacy and security requirements. This means, for example, that all medical information obtained through the wellness program will be transmitted and stored in a secure manner as required by law, and no information you provide as part of the wellness program will be used in making any employment decision or in making any decision about your eligibility to enroll in PEEHIP. Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs involving information you provide in connection with the wellness program, we will notify you immediately.

You may not be discriminated against in employment because of the medical information you provide as part of participating in the wellness program, nor may you be subjected to retaliation if you choose not to participate.

If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact the PEEHIP Section 1557 Coordinator at 877.517.0020.